SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)

FOR LINE NUMBER: (check only one)

21b	22	X 23	24	25	26
27	28a	28b	28c	29	30b

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NAME OF COMMITTEE (In Full)

COUNCIL FOR RESPONSIBLE NUTRITION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)

PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City	State	Zip Code
Long Branch	NJ	07740

Purpose of Disbursement

Candidate Name
PALLONE FOR CONGRESS

Category/Type: 011

Office Sought: X House   Senate   President

Disbursement For: 2012
X Primary   General   Other (specify) ▼

State: NJ   District: 06

Date of Disbursement
M M 03 / D D 16 / Y Y Y Y 2012

Transaction ID : SB23.4519

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)

RELY ON YOUR BELIEFS FUND

Mailing Address 209 PENNSYLVANIA AVENUE, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement

Candidate Name
RELY ON YOUR BELIEFS FUND

Category/Type: 011

Office Sought: House   X Senate   President

Disbursement For: 2016
X Primary   General   Other (specify) ▼

State: MO   District:

Date of Disbursement
M M 03 / D D 08 / Y Y Y Y 2012

Transaction ID : SB23.4511

Amount of Each Disbursement this Period
1000.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/Type:

Office Sought: House   Senate   President

Disbursement For:
Primary   General   Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)...► 2000.00

TOTAL This Period (last page this line number only)...► 6000.00

FE6AN026

FEC **Schedule B (Form 3X)** Rev. 02/2003